



Borough of Harrogate.

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# ANNUAL REPORT

OF THE

SCHOOL

MEDICAL OFFICER

FOR

1934

BY

*JAMES MAIR, M.B., D.P.H.,*

*School Medical Officer.*

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B. THORPE, PRINTER, HARROGATE.









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MUNICIPAL OFFICES,  
HARROGATE,  
*April, 1935.*

*To the Chairman and Members of the  
Harrogate Education Committee.*

LADIES AND GENTLEMEN,

I have the honour to submit to you for your information and consideration my Annual Report upon the inspection of School Children and the work of the School Medical Department for the year 1934.

The Report is on the lines suggested by the Board of Education, and, while condensed as much as possible, is believed to contain all essential information.

I have again to thank the Members of the Education Committee for the courtesy always extended to me, and the Director of Education and his staff for assistance always willingly given.

I have especially to thank the members of my own staff and the School Teachers, without whose assistance and co-operation the work could not be carried on.

I am, Ladies and Gentlemen,

Your obedient servant,

JAMES MAIR,  
*School Medical Officer,*



# THE EDUCATION COMMITTEE.

1933-34

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ALD. J. A. WHITEOAK.

## Vice-Chairman :

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## Members of Committee :

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ALDERMAN CHARLES

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ALDERMAN WHITEOAK

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DR. SINCLAIR MILLER

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MR. W. TOPHAM

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MISS NORTHROP

MISS CORLETT

1934-35

## Chairman :

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MR. J. S. HOLMES

MR. A. J. PYRAH

MR. W. P. WELPTON, B.Sc.

MISS NORTHROP

MISS CORLETT

## School Medical Staff.

### School Medical Officer :

JAMES MAIR, M.B., D.P.H.

### Ophthalmic Surgeon :

W. J. FORBES, M.B.

(Part-time)

### School Dentist :

C. S. W. SABINE, L.D.S.

(Part-time)

### Senior School Nurse :

\*MISS A. WARDLE, C.M.B., M.R.S.I. Cert. of Ministry of Health.

### School Nurses :

\*MISS M. NIBLETT, C.M.B.

\*MISS M. B. WILSON, C.M.B.

\*MISS N. GREEN, C.M.B.

\*MISS M. LANGTON, C.M.B.

### Clerk :

MISS M. UNSWORTH (Part-time)

MISS P. LEAF, Junior Clerk (Part-time)

\* Are also Health Visitors.

## STAFF.

The names and qualifications of the Staff are set out on the preceding page. There has been no change during the year.

## CO-ORDINATION.

There has been no alteration in the arrangements for the co-ordination of the work of the School Medical Service with that of other health services. These arrangements were described in the annual report for 1932, to which reference may be made.

### The School Medical Service in relation to Public Elementary Schools.

There are ten elementary schools—six “provided” and four “non-provided”—in the Borough.

These schools have accommodation for 4,525 children, and at the end of the year there were 3,745 names on the registers.

The hygienic condition of St. Peter's Church of England School has been adversely commented on in former reports, and it is satisfactory to know that the Managers have acquired the old Harrogate Infirmary, and that plans for its conversion into a school are being submitted to the Board of Education. When completed, the new school will be a great improvement on the existing one.

The sanitary state of the other schools is on the whole satisfactory; some of them are, however, still provided with old-fashioned trough water closets, which cannot be considered satisfactory. These should be converted to modern pedestal closets, and it is hoped that the Committee who have the subject under consideration at present will have this conversion carried out at an early date.

## MEDICAL INSPECTION.

The children inspected during the year fall into two groups:—

- (a) Routine Medical Inspections.
- (b) Non-routine Medical Inspections.

The routine inspections comprise the following age groups:

- (1) Entrants: i.e., Children newly admitted to school usually between the ages of 5 and 6 years.



- (2) Intermediates: i.e., children born in 1926 and who will therefore reach 8 years of age during the year.
- (3) Leavers: i.e., children born in 1921, and older children who have not been inspected since reaching the age of 12 years.
- (4) Other Routine Inspections: i.e., children of other ages who for various reasons have not previously been inspected: e.g., late entrants; transfers from other schools; etc.

The non-routine group comprises those children who are referred for "Special" examination on account of known or suspected defect, and also those children who at previous inspections have been found to be suffering from some defect and are kept under observation until this defect is remedied or they have left school.

All routine inspections and the majority of re-inspections are carried out on school premises during school hours, and the Board's schedule of Medical Inspection is followed throughout.

Six schools were inspected twice during the year, but it was found impracticable to inspect the remaining 4 a second time; these were, however, inspected as early as was possible 1935.

The number inspected in each group was:—

<b>Routine.</b>		1933.	1934.
Entrants .....		496	372
Intermediates .....		385	393
Leavers .....		402	344
Total .....		1283	1109
Other routine children .....		156	157
Grand Total .....		1439	1266
<b>Non-Routine.</b>			
Special Inspections (individual children) .....		549	641
Number of re-inspections .....		930	1284
Total .....		1479	1925
Number of individual children (routine, special, re-inspections) inspected...		2288	2159

## FINDINGS OF MEDICAL INSPECTION.

These are set out in Table II. in the Appendix, but it is convenient to refer here to some of the defects in more detail.

### (a) Nutrition.

The children examined at routine inspections were on the whole well nourished. In 158 the nutrition was noted as being below normal, and in 32—2.4 per cent. of the total number inspected—the condition was such that it was considered to require treatment.

It must be admitted that the estimation of the state of nutrition is by no means easy. There is no method by which it may be gauged exactly, and as the standards of different observers vary more or less, it is almost impossible to obtain strictly comparable figures. It can be said quite definitely, however, that there is no evidence whatever to show that under-nourishment is increasing; on the contrary, the children are, on the whole, better nourished than a few years ago, and this is borne out not only by the figures, but by the general impression obtained during the medical inspection.

Under-nourishment is by no means always or even mainly due to insufficiency of food. Apart from those cases caused by disease, it may be due to improper food; insufficient rest, or insanitary home conditions.

There are very few, if any, children in Harrogate who do not receive sufficient food, but there are a proportion who receive improper food, and this not always from lack of means, but frequently from lack of skill or inclination to provide proper home-cooked meals.

### (b) Cleanliness.

During the year the School Nurses paid 85 visits to the schools, and made 15,074 inspections. It was found that 142 children at one or other inspection had nits or vermin in their hair. At the first inspection at the beginning of the year 5 per cent. of the girls were found to be verminous, and at the last inspection at the end of the year the percentage had fallen to 3.7.

It should be noted that any child whose hair is not absolutely free from nits or vermin is classed as verminous, and that, in practically every case, the amount of infection was very small.

### (c) Diseases of the Skin.

These are not very common, and are for the most part of little consequence. Altogether 91 cases (16 routine and 75 special) were noted. These were mainly eczematous and impetiginous conditions, but 4 cases of Scabies and 4 of Ringworm of the body occurred among special children.

For the second year in succession no case of ringworm of the scalp was discovered.

### (d) Visual Defects and External Eye Diseases.

The visual acuity of all children in the leaver and intermediate classes is tested as a matter of routine, and any child whose vision is not better than 6/12 with each eye is referred to the Ophthalmic Clinic for more detailed examination. An exception is made in the case of those younger children who are not very certain of their letters; such cases are referred for further test by the medical inspector before being referred to the Ophthalmic Clinic.

Among routine children, 140 were found to be suffering from defective eyesight as defined above; of these, 49 were referred for treatment, and the remainder, who were already provided with spectacles, were referred for later examination by the medical inspector and were kept under observation.

In addition, 26 children were found to be affected with squint, and of these 12 were referred for treatment.

External eye disease was present in 29 children; these included 14 cases of blepharitis; 3 of conjunctivitis; and 1 of corneal opacities.

### (e) Nose and Throat Defects.

The commonest and most important defect among school children is enlargement of the tonsils and adenoids, either combined or singly. This was found in 79 children, of whom 21 were referred for immediate operation, the remainder being kept under observation.

There is a considerable decrease in the number of cases referred for operation, due to the fact that more discrimination is experienced in selecting cases for operation. Only those cases of tonsillar enlargement presenting definite symptoms of sepsis, mouth-breathing, etc., are referred for immediate operation; others are kept under supervision.

**(f) Ear Disease and Defective Hearing.**

Otitis Media—discharging ears—was the only ear disease of any consequence. This was present in 13 children, of whom 11 were referred for treatment.

In 15 children—6 routine and 9 special—deafness of some degree was present. None were sufficiently deaf to warrant transferring to a special school, but the teachers were notified and asked to place the children in the most favourable position for hearing.

**(g) Dental Defects.**

Details of these are given in the report of the School Dental Surgeon.

**(h) Orthopædic and Postural Defects.**

These were found in 10 children, but in only 2 cases was treatment considered necessary.

**(i) Heart Disease.**

Organic heart disease was found in 7 children, of whom 1 was referred for treatment.

**(j) Tuberculosis.**

One case of definite pulmonary tuberculosis was discovered and referred to the Tuberculosis Officer for treatment, and one case of quiescent abdominal tuberculosis was kept under observation.

**FOLLOWING UP.**

The arrangements for the “following up” of defective children are on the same lines as in former years. The bulk of the work is done by the School Nurses, who during the year paid 2,799 visits to the homes of children; of these 560 were “following up”; 524 were in connection with infectious diseases; and 1,715 were for various reasons.

**ARRANGEMENTS FOR TREATMENT.**

In the Annual Report for 1933 it was stated that a new arrangement had been made with the Harrogate and District General Hospital, whereby, in return for a payment of £2/2/- per case, that Institution undertook the treatment of school children suffering from enlarged tonsils and/or adenoids, and also undertook to keep children in hospital for at least 24 hours after operation, and longer if necessary.

Unfortunately, as this arrangement to some extent ran counter to the Hospital's contributory scheme, difficulty was experienced in putting it into operation, and it was not in full working order until the beginning of October.

The number of cases receiving treatment under this arrangement is in consequence considerably less than would otherwise have been the case.

There has been no other alteration in the arrangements for treatment.

### SCHOOL CLINICS.

(a) **General Clinic:**—The general clinic conducted by the School Medical Officer on one afternoon per week serves the double purpose of an inspection clinic and a clinic for the treatment of minor ailments.

It was attended during the year by 679 children, of whom 585 were new cases.

The principal reasons for the attendance of the new cases were:—

Diseases of the Eye .....	40
Diseases of the Ear .....	33
Tonsils and/or Adenoids .....	22
Other diseases of the Throat and Nose .....	43
Skin Diseases .....	75
Infectious Diseases .....	81
Enlarged Glands .....	6
Deformities .....	1
Nervous Conditions .....	4
Other Conditions .....	280
	<hr/>
	585

The Senior School Nurse is in attendance at this Clinic each morning for the treatment of minor ailments, discharging ears, etc. The attendances at this Clinic during the year were 1,598; the corresponding figure for the previous year was 1,466.

(b) **Starbeck Clinic:**—A School Nurse attends at Starbeck School once a week—more frequently if necessary—for treatment of children attending this school who are suffering from various minor ailments, mainly skin diseases and slight injuries. Other cases are referred to the General Clinic.



This Clinic has proved very useful in dealing with such cases; in many it has obviated the necessity for absence from school, and in others it has considerably reduced the period of absence.

During the year it was attended by 88 children, the majority of whom were suffering from minor diseases of the skin.

(c) **Ophthalmic Clinic:**—Dr. W. J. Forbes continued to act as Ophthalmic Surgeon to the Authority, and attended at the Clinic on one afternoon per week during the school terms.

During the year it was attended by 195 children, of whom 107 were new cases. The number attending is considerably above the number referred by the School Medical Officer for treatment. This is due partly to the fact that in a number of instances the Ophthalmic Surgeon instructs children to attend for re-examination after a stated period, and partly to the fact that a number of children are sent directly to the Clinic by teachers and parents.

The errors of refraction found in the new cases were:—

Hypermetropia .....	17
Myopia .....	10
Hypermetropic Astigmatism .....	39
Myopic Astigmatism .....	18
Mixed Astigmatism .....	15
No apparent defect, or treatment postponed..	8

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No spectacles were prescribed for 33 children who attended the Clinic, either because none were required or because they were already wearing suitable glasses. Spectacles were prescribed for the remaining 162, and of these 158 had been obtained at the end of the year (56 under the Authority's scheme and 102 otherwise). In 33 instances spectacles were provided at the cost of the Authority.

(d) **Dental Clinic:**—The report of Mr. C. S. W. Sabine, L.D.S., School Dentist, is appended:—

“ The numbers of fillings and extractions performed during 1934 are above the average for the two preceding years; 1,681 fillings were done (average 1,589) and 484 extractions (average 500).

"Parents are more than ever taking advantage of the fact that they can bring their children to the Clinic for advice on any of the mornings appointed for Dental Treatment (viz., Tuesday, Wednesday and Friday). It is not necessary to wait until there is a dental inspection at the school.

"The majority of extractions of permanent teeth are due to the fact that they have not been filled in time. The cause of this is refusal at some time to have fillings done when decay has just commenced, or the absence of the child from a dental inspection.

"As I have stated above, parents may bring their children down to the Clinic whenever they like for this purpose.

"Owing to improved methods in the use of local anæsthetics (and also improved anæsthetics themselves) all teeth, temporary and permanent, can now be extracted absolutely painlessly. It is no doubt due to this fact that extractions are now so 'popular.'

"It is regretted that still a large number of children do not clean their teeth. Parents are advised to take steps in this matter."

C. S. W. SABINE.

(e) **X-Ray Treatment of Ringworm**:—The arrangements made with the General Hospital for X-Ray treatment of ringworm continue in operation. As, however, no case of ringworm was discovered during the year, it was not necessary to make use of them.

(f) **Tuberculosis**:—The close co-operation between the School Medical Officer and the Tuberculosis Officer of the West Riding County Council continues.

All definite or suspected cases of tuberculosis are referred to the Tuberculosis Officer, who, as a rule, keeps definite cases under his own observation and returns others to the School Medical Officer. No child who has been notified as tuberculous is allowed to attend school without the sanction of the Tuberculosis Officer.

(g) **Diseases of the Eye, Ear, Throat, and Nose**:—Minor diseases of these organs are treated at the School Clinic, and more serious cases are referred to the General Hospital.

The arrangements for the treatment of enlarged tonsils at the Hospital have already been mentioned, and although there is no definite arrangement for the treatment of diseases of the

eye, and ear, such cases are, in fact, dealt with by the Hospital. It would, however, be much more satisfactory if some definite arrangement were entered into, and it is hoped that this will be done in the near future.

(h) **Orthopædic Treatment**:—It is regretted that the West Riding County Council have not yet felt themselves to be in a position to carry out their proposed Orthopædic scheme, so that the position still is as described in the report for 1932.

## INFECTIOUS DISEASES.

The arrangements for the control of infectious diseases in schools remains as in former years, and continue to work smoothly.

The number of cases known to have occurred among elementary school children during the year was:—

	1933.	1934.
Scarlet Fever .....	31	126
Diphtheria .....	27	5
Whooping Cough .....	80	63
Measles .....	17	177
Chicken Pox .....	231	162
Mumps .....	35	169

**Scarlet Fever**, as will be seen from the above figures, was much more prevalent than in the previous year.

The disease first began to increase about the end of March, and continued prevalent until about the middle of July, by which time it had fallen to about normal proportions in most of the schools. In Christ Church School, however, cases kept cropping up pretty regularly until the end of the year. While no school escaped, those most affected were Christ Church, Grove Road, Bilton Endowed, and Bilton Grange.

The severity of the disease varied very much; many cases were mild—so mild that in several instances a diagnosis was only made on the appearance of desquamation, and there is good reason to believe that a number of cases were missed entirely—but a number were severe, and there was one death: that of a girl aged 8 years attending Bilton Grange School.

### Diphtheria.

Was almost entirely absent from the schools—only five cases occurring among school children during the year.



### **Immunisation.**

In December, 1933, the Council resolved to make arrangements for the immunisation of children, and the Education Committee agreed to allow their staff and the school premises to be utilised so far as was necessary. Arrangements were made for the immunisation to be done on the school premises, and in the beginning of March a circular advising immunisation, and enclosing a form of acceptance, was, through the agency of the Head Teachers, sent to the home of every elementary school child in Harrogate.

The response was immediate, and the number accepting was almost embarrassingly large, as within a fortnight of sending out the circulars over 1,000 acceptances were received.

The total number of children immunised during the year was 2,050; nearly all children of school age, and representing nearly two-thirds of the average attendance. As the object was to immunise the largest possible number of children in the shortest time, no Schick testing was done. The immunising agent was T.A.F.; the number of re-actions was negligible; and those which did occur were trifling.

### **Measles.**

Was also considerably more prevalent, but was almost entirely confined to four schools, viz.: Starbeck (57 cases); Western (35); Bilton Grange (32); and Grove Road (24).

Practically all the cases occurred during the months of June and July, and during the last quarter of the year very few cases occurred.

### **Whooping Cough.**

Was less prevalent than in the previous year, and the bulk of the cases occurred in three schools, viz.: Grove Road (19 cases); Christ Church (17); and Western (13).

The cases were scattered pretty evenly throughout the year, and there were no deaths.

### **Dysentery.**

Towards the end of the year there was a small outbreak of dysentery, affecting altogether some twenty persons, of whom six were school children. The affected children were in attendance at three schools; in one school there were three cases (all members of the same family), and two schools had one case each.

The diagnosis was bacteriologically confirmed in two cases, and the other four cases were clinically quite typical, although the bacteriological examination was negative.

The disease, which was of the Flexner type, was mild, and all recovered after a short illness.

The outbreak died out about the end of December, and since that time there have been no further cases.

## OPEN AIR EDUCATION.

"During the year physical exercises have formed a regular part of the curriculum of the elementary schools, receiving special attention by the provision of additional equipment and apparatus necessary to bring the instruction up to date. The result has been a marked improvement in the enthusiasm and alacrity of the children in these exercises.

"Organised games have included football, hockey, net-ball, and swimming, which have been encouraged also by the teachers through inter-school matches and a swimming gala which they arranged.

"Folk-dancing has been taught regularly, and maintained its popularity among the children, who benefit very much from it.

"As in previous years, the Education Committee has rented the Swimming Baths, and, where necessary, football and cricket grounds for organised games.

"The valuable services rendered by the teachers, who give freely of their time, and the help of others who are not teachers, but have readily and unstintingly assisted with the organised games, are deserving of comment, and this opportunity is taken of placing on record the Education Committee's appreciation of these services."

W. E. C. JALLAND,

Director of Education.

## PROVISION OF MEALS.

No meals are provided by the Education Authority, nor does there seem to any great need for such provision.

In several schools during the winter months the teachers have made arrangements whereby children can obtain a cup of hot cocoa or malted milk in the middle of the forenoon for

a charge of  $\frac{1}{2}$ d. The Committee have under consideration the provision of milk under the Milk Marketing Board's Scheme, but no decision has yet been reached.

## **CO-OPERATION OF PARENTS.**

Parents are always invited to be present at routine inspections and at certain selected re-inspections.

During the year 816 parents (64%) were present at the routine inspections, and 289 attended at re-inspections.

## **CO-OPERATION OF TEACHERS, ATTENDANCE OFFICERS AND VOLUNTARY BODIES.**

Teachers give much valuable assistance; much of the preliminary work of medical inspection is done by them; and their personal influence is often of assistance in securing treatment. Their services are always willingly given, and are much appreciated by the Medical Department.

Attendance Officers, too, give valuable assistance, especially in securing the attendance of children at the clinics and in helping to secure treatment for defective children.

The Voluntary Bodies whose services are most frequently utilised are:—

(a) The National Society for the Prevention of Cruelty to Children, which helps in "following up" and in investigating and supervising any cases of neglect or ill-treatment.

(b) The Citizens' Guild of Help, which gives assistance in necessitous cases and secures accommodation in Convalescent Homes for a certain number of delicate children.

## **BLIND, DEAF AND EPILEPTIC CHILDREN.**

The methods adopted for ascertaining children suffering from these defects were described in the Annual Report for 1932. These methods are believed to be adequate, and there are few, if any, such children who do not come to the knowledge of the Authority.

No special schools are provided locally for these children, but arrangements are made for their maintenance by the Authority in special schools in other areas.

At the end of the year 2 deaf children and 1 blind child were so maintained.

## SPECIAL SCHOOLS.

The Authority has maintained a special school for mentally defective children since 1920, but, for the reasons set out in the Annual Report for 1933, it was decided to close this school, which ceased to function on the 31st March.

## FULL TIME COURSES OF HIGHER EDUCATION FOR BLIND, DEAF, DEFECTIVE AND EPILEPTIC STUDENTS.

These are not provided.

## NURSERY SCHOOLS.

There are no nursery schools in Harrogate.

## PARENTS' PAYMENTS.

Except in the case of treatment of minor ailments, which is free, and dental treatment, for which a charge of 6d. per attendance is made, parents are expected to pay the full cost of treatment provided by the Authority.

Where the family income falls below a certain figure, the whole or part of the cost may be remitted.

Spectacles are provided at cost price, or, in necessitous cases, free.

The amount received during the year was:—

	1933.	1934.
Dental Treatment .....	£22 18 0	£23 10 0
Hospital Treatment .....	0 0 0	2 0 0
X-Ray Treatment .....	0 0 0	0 0 0
Provision of Spectacles .....	7 1 0	3 9 9
	<hr/> £29 19 0	<hr/> £28 19 9

## STATISTICAL TABLES.

The statistical tables required by the Board of Education are appended.

## MEDICAL INSPECTION RETURNS

**TABLE 1.**  
**RETURN OF MEDICAL INSPECTIONS.**

### A.—ROUTINE MEDICAL INSPECTIONS.

Number of Inspections in the prescribed Groups.

Entrants	...	...	...	...	...	372
Second Age Group	...	...	...	...	...	393
Third Age Group	...	...	...	...	...	344
Total						<u>1109</u>

Number of other Routine Inspections   ...   ...   ...   157

### B.—OTHER INSPECTIONS.

Number of Special Inspections	...	..	...	...	641
Number of Re-Inspections	...	...	...	...	1284
Total					<u>1925</u>

TABLE II.

## A. Return of Defects found by Medical Inspection in the Year ended 31st December, 1934.

DEFECT OR DISEASE.		Routine Inspections		Special Inspections	
		No. of Defects		No. of Defects	
		Requiring Treatment	Requiring to be kept under observation, but not requiring treatment.	Requiring Treatment.	Requiring to be kept under observation, but not requiring Treatment.
(1)		(2)	(3)	(4)	(5)
Malnutrition	...	30	128	—	—
Uncleanliness :		—	—	—	—
(See Table IV., Group V.)					
Skin	Ringworm—Scalp	—	—	—	—
	„ Body	—	—	4	—
	Scabies	—	—	4	—
	Impetigo	—	—	47	—
	Other Diseases (Non-Tuberculous)	15	1	20	—
Eye	Blepharitis	14	—	13	—
	Conjunctivitis	3	—	12	—
	Keratitis	—	—	1	—
	Corneal Opacities	—	1	1	—
	Defective Vision (excluding Squint)	49	91	4	1
	Squint	12	14	5	—
	Other Conditions	9	2	4	—
Ear	Defective Hearing	—	6	—	9
	Otitis Media	11	2	17	—
	Other Ear Diseases	4	5	7	—
Nose and Throat	Chronic Tonsillitis only	15	49	10	—
	Adenoids only	5	6	1	—
	Chronic Tonsillitis and Adenoids	1	3	10	—
	Other Conditions	2	7	25	21
Enlarged Cervical Glands (Non-Tuberculous)		1	7	3	4
Defective Speech		1	6	1	—
Heart and Circulation	Heart Disease—Organic	1	6	—	5
	„ „ Functional	—	14	—	1
	Anæmia	5	2	—	—
Lungs	Bronchitis	3	1	1	—
	Other Non-Tuberculous Diseases	4	6	5	9



TABLE II.—Continued.

DEFECT OR DISEASE.						Routine Inspections		Special Inspections	
						No. of Defects		No. of Defects	
						Requiring Treatment	Requiring to be kept under observation, but not requiring Treatment	Requiring Treatment	Requiring to be kept under observation, but not requiring Treatment.
(1)						(2)	(3)	(4)	(5)
Tuber- culosis	Pulmonary :								
	Definite ... ..					1	—	—	1
	Suspected ... ..					—	—	—	—
	Non-Pulmonary :								
	Glands ... ..					—	—	1	—
	Bones and Joints ... ..					—	—	—	—
Nervous System	Skin ... ..					—	—	—	—
	Other Forms ... ..					—	1	—	—
	Epilepsy ... ..					1	2	—	—
	Chorea .. ...					—	—	—	4
Deformities	Other Conditions ... ..					—	2	—	—
	Rickets ... ..					—	—	—	—
	Spinal Curvature ... ..					—	1	—	—
	Other Forms ... ..					2	7	1	—
Other Defects and Diseases (excluding Uncleanliness & Dental Diseases)						24	19	290	81
Total ... ..						213	389	487	136

**B. Number of Individual Children found at Routine Medical Inspection to require Treatment (excluding Uncleanliness and Dental Diseases).**

GROUP	Number of Children	
	Inspected.	Found to require Treatment
(1)	(2)	(3)
PRESCRIBED GROUPS :		
Entrants .. ...	372	48
Second Age Group ... ..	393	59
Third .. ..	344	35
Total (Prescribed Groups) .. ...	1,109	142
Other Routine Inspections .. ..	157	38
Grand Total ... ..	1266	180

TABLE III.

## Return of all Exceptional Children in the Area, 1934.

## Children Suffering from Multiple Defects.

Defects.	No.	School Attended.
Epilepsy and Mental Defect ...	1	No School.
Epilepsy and Paralysis .. ...	1	Elementary School
Mental Defect and Paralysis ...	2	{ 1 at Elementary School 1 at no School.
Mental Defect and Ricketty Deformity ... ..	1	No School.
Total ..	5	

## Blind Children.

At Certified Schools for the Blind	At Public Elementary Schools	At other Institutions	At no School or Institution	TOTAL
1	—	—	—	1

## Partially Sighted Children.

At Certified Schools for the Blind	At Certified Schools for the partially Blind	At Public Elementary Schools	At other Institutions	At no School or Institution	TOTAL
2	—	3	—	—	5

## Deaf Children.

At Certified Schools for the Deaf	At Public Elementary Schools	At other Institutions	At No School or Institution	TOTAL
2	1	—	—	3



TABLE III.—continued.

**Partially Deaf Children.**

At Certified Schools for the Deaf	At Certified Schools for the Partially Deaf	At Public Elementary Schools	At other Institutions	At no School or Institution	TOTAL
—	—	1	—	—	1

**Mentally Defective Children—Feeble-minded Children.**

At Certified Schools for Mentally Defective Children	At Public Elementary Schools	At other Institutions	At no School or Institution	TOTAL
—	1	—	8	9

**Epileptic Children—Children Suffering from Severe Epilepsy.**

At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
—	—	—	—	—

**Physically Defective Children.****A—Tuberculous Children.****I.—Children Suffering from Pulmonary Tuberculosis  
(Including pleura and intra-thoracic glands).**

At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
—	2	—	—	2

**II.—Children Suffering from Non-Pulmonary Tuberculosis.**

At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
1	4	—	1	6

**B. Delicate Children.**

At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
—	52	—	—	52

**C. Crippled Children.**

At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
—	8	—	2	10

**D. Children with Heart Disease.**

At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
1	4	—	5	10

TABLE IV.

Return of Defects Treated during the Year ended 31st December, 1934.

## TREATMENT TABLE.

GROUP I.—MINOR AILMENTS (excluding Uncleanliness, for which see Group VI.)

Disease or Defect.	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme	Otherwise	Total
(1)	(2)	(3)	(4)
Skin—			
Ringworm, Scalp—			
(i.) X-Ray Treatment ... ..	—	—	—
(ii.) Other            " ... ..	—	—	—
Ringworm—Body ... ..	4	—	4
Scabies ... ..	4	—	4
Impetigo ... ..	47	—	47
Other Skin Disease ... ..	20	6	26
Minor Eye Defects ... ..	18	10	28
(External and other, but excluding cases falling in Group II.)			
Minor Ear Defects ... ..	30	14	44
Miscellaneous ... ..	288	46	334
( <i>e.g.</i> , minor injuries, bruises, sores, chilblains, etc.)			
Total ... ..	411	76	487

GROUP II—DEFECTIVE VISION AND SQUINT (excluding Minor Eye Defects treated as Minor Ailments—Group I).

Defect or Disease.	No. of Defects dealt with.		
	Under the Authority's Scheme	Otherwise	Total
(1)	(2)	(3)	(4)
Errors of Refraction (including Squint) (Operations for Squint should be recorded separately in the body of the Report).	195	3	198
Other Defect or Disease of the Eyes (excluding those recorded in Group I.)	—	—	—
Total ... ..	195	3	198

Total number of Children for whom spectacles were prescribed

(i) Under the Authority's Scheme	...	...	...	162
(ii) Otherwise	...	...	...	3

Total number of children who obtained or received Spectacles

(i) Under the Authority's Scheme	...	...	...	56
(ii) Otherwise	...	...	...	105

### GROUP III.—TREATMENT OF DEFECTS OF NOSE AND THROAT.

NUMBER OF DEFECTS.													
Received Operative Treatment										Received other forms of Treatment		Total number treated	
Under the Authority's Scheme, in Clinic or Hospital				By Private Practitioner or Hospital, apart from the Authority's Scheme				Total					
(1)				(2)				(3)					
(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)	(4)	(5)
—	—	12	—	—	—	—	—	—	—	12	—	5	17

(i) Tonsils only. (ii) Adenoids only. (iii) Tonsils and Adenoids.  
(iv) Other defects of the nose and throat.

## GROUP IV.—ORTHOPAEDIC AND POSTURAL DEFECTS.

Number of Children Treated.	Under the Authority's Scheme. (1)			Otherwise. (2)			Total number treated.
	Residential Treatment with education.	Residential Treatment without education.	Non-Residential Treatment at an orthopaedic clinic.	Residential Treatment with education.	Residential Treatment without education.	Non-Residential treatment at an orthopaedic clinic.	
	(i.)	(ii.)	(iii.)	(i.)	(ii.)	(iii.)	
	—	—	—	—	—	—	—

## GROUP V.—DENTAL DEFECTS.

## (1) Number of Children who were—

## (i) Inspected by the Dentist :

Routine Age Groups	Aged :	Total 4144
	5—139	
	6—419	
	7—484	
	8—477	
	9—455	
	10—445	
	11—486	
	12—399	
	13—513	
	14—327	

Specials ... .. 323

Grand Total ... .. 4467

(ii) Found to require treatment ... .. 2193

(iii) Actually treated ... .. 1315

## (2) Half-days devoted to:—

Inspection	...	23	Total 145
Treatment	...	122	

(3) Attendances made by children for treatment... .. 1395

## (4) Fillings :—

Permanent teeth	...	1655	Total 1681
Temporary teeth	...	26	

## (5) Extractions :—

Permanent teeth	...	253	Total 484
Temporary teeth	...	231	

(6) Administrations of general anaesthetics for extractions ... Nil

## (7) Other operations :—

Permanent teeth	}	Total 94
(Scaling) ...	94	
Temporary teeth ...	—	

## GROUP VI.—UNCLEANLINESS AND VERMINOUS CONDITIONS.

(i.) Average number of visits per school made during the year by the School Nurses ... .. 8.5

(ii.) Total number of examinations of children in the Schools by School Nurses ... .. 15,074

(iii.) Number of individual children found unclean ... .. 142

(iv.) Number of children cleansed under arrangements made by the Local Education Authority ... .. Nil

(v.) Number of cases in which legal proceedings were taken :—

(a) Under the Education Act, 1921 ... .. Nil

(b) Under School Attendance Byelaws ... .. Nil





